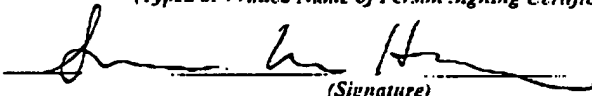
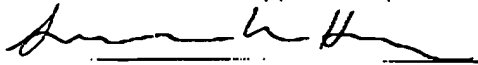


CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No.	
Applicant(s): Lloyd Wolfmarger, Jr.			LNRF.006	
Serial No. 08/619,412	Filing Date March 21, 1996	Examiner A. Nguyen	Group Art Unit 3306	
Invention: PROCESS FOR CLEANING LARGE BONE GRAFTS AND BONE GRAFTS PRODUCED THEREBY				
FAX COPY RECEIVED APR 06 1998 GROUP 3200				
I hereby certify that this <u>Amendment & transmittal (3 pages); and terminal disclaimer (1 page)</u> <small>(Identify type of correspondence)</small>				
is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>(703) 305-3579</u>)				
on <u>April 6 1998</u> <small>(Date)</small>				
<u>Susanne M. Hopkins, Esq., Reg. No: 33,247</u> <small>(Typed or Printed Name of Person Signing Certificate)</small>				
 <small>(Signature)</small>				
Note: Each paper must have its own certificate of mailing.				
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AMENDMENT TRANSMITTAL LETTER (Small Entity)			Docket No. LNRF.006		
Applicant(s): Lloyd Wolfenbarger, Jr.					
Serial No. 08/619,412	Filing Date March 21, 1996	Examiner A. Nguyen	Group Art Unit 3306		
Invention: PROCESS FOR CLEANING LARGE BONE GRAFTS AND BONE GRAFTS PRODUCED THEREBY					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
<input checked="" type="checkbox"/> Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted.					
<input type="checkbox"/> A verified statement to establish Small Entity status under 37 FR 1.27 is enclosed.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	19 -	21 =	0 x	\$11.00	\$0.00
INDEP. CLAIMS	2 -	5 =	0 x	\$41.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. _____ A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.					
<input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: April 6, 1998		
Susanne M. Hopkins Reg. No: 33,247 JONES & VOLENTINE 12200 SUNRISE VALLEY DRIVE RESTON, VA 20191 TEL. NO: 703-715-0870 cc:			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231. <div style="text-align: center;"> Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence </div>		

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